

Host Team Information and Release Form

Please print clearly.

Name _____ Birthdate _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____ SSN _____

(SSN needed in order to do the background check)

Email _____

Authorization to Release Personal Records

I, undersigned, give my authorization to Bidwell Presbyterian Church and its representatives to release any and all records or information related to working with minors. The Church may contact my references and appropriate government agencies as deemed necessary in order to verify my suitability.

I understand that a nationwide background check will be performed before I can volunteer with the Host Team at Bidwell Presbyterian Church.

Should my application be accepted, I agree to be bound by the bylaws and policies of Bidwell Presbyterian Church and to refrain from unscriptural conduct in the performance of my services on behalf of the church.

Applicant's Signature: _____ Date: _____

References: 3 required. Please list your references here.

Name:	Occupation	Address/Phone #	Known for how long?
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1. _____

2. _____

3. _____

